

Even small drop in task load can cut odds of physician burnout

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A leading contributor to physician burnout is sometimes overwhelming load of the varied tasks they perform daily. For each 10% drop in task load, there are 33% lower odds of experiencing physician burnout, according to a national survey whose results were published in *The Joint Commission Journal on Quality and Patient Safety*. The relationship between a physician's task load and burnout signals a need for health systems to enhance their focus to improve the practice environment and, consequently, doctors' well-being.

The study, "Physician Task Load and the Risk of Burnout Among US Physicians in a National Survey," was co-written by:

- Christine Sinsky, MD, AMA vice president of Professional Satisfaction.
- Michael Tutty, PhD, group vice president of Professional Satisfaction at the AMA.
- Lindsey E. Carlasare, research manager at the AMA .
- Elizabeth Harry, MD, associate professor of internal medicine at the University of Colorado School of Medicine and senior director of clinical affairs at the University of Colorado Hospital.
- Lotte N. Dyrbye, MD, MHPE, an internist at Mayo Clinic in Rochester, Minnesota.
- Maryam S. Makowski, PhD, associated director of scholarship and health promotion at Stanford Medicine WellMD Center in Palo Alto, California.
- Mickey Trockel, MD, PhD, director of scholarship and health promotion at Stanford Medicine WellMD Center.
- Colin P. West, MD, PhD, a consultant for the division of general internal medicine at the Mayo Clinic.
- Tait D. Shanafelt, MD, chief wellness officer and professor at Stanford University.

"Medicine is a mentally and physically taxing career. Some features of the environment, such as poorly implemented technology and low-value administrative tasks, add greatly to the cognitive workload," said Dr. Sinsky. "Our study demonstrates that greater cognitive workload, as measured

with a standardized instrument, is associated with higher levels of burnout.”

Looking at whether task load correlated with physician burnout scores between October 2017 and March 2018, the survey showed that 38.8% reported high emotional exhaustion, 27.4% experienced depersonalization and 44% exhibited at least one symptom of burnout. Additionally, the physician task load score was 260.9 out of 400, which was measured by the National Aeronautics and Space Administration (NASA) Task Load Index (TLX).

The NASA TLX didn’t measure individual tasks, but looked at mental, physical and temporal demands, and perception of effort. Physicians were asked to rate their score on an interval scale ranging from low to high. For example, tasks that might make doctors feel rushed or have difficulty performing at the level they strive for are computerized order entry, visit note documentation, multiple security logins, and perfunctory and low-value—but mandatory—organizational compliance modules.

“Many practices and policies that add burden to the physician’s workday may not have a strong evidence base or may have outlived their utility,” she said. “Practice leaders can improve the environment” by eliminating policies that are outdated or lack a strong evidence basis.

Health care organizations should focus on reducing administrative burdens to improve professional satisfaction. The AMA offers a lot of great how-to advice on accomplishing that vital goal.

1 5 steps physicians can take to get rid of “stupid stuff”

One area that has created significantly more work for physicians has been the electronic health record. Learn how to reduce those administrative burdens by getting rid of stupid stuff.

2 These 4 workflow changes help cut burnout by 45%

An academic general medicine clinic in San Francisco aimed to change faculty perceptions of burnout and work-life balance by creating an efficient health care workflow.

3 How true teamwork can tame the physician's in-basket

The default destination for most communication in the physician office is a doctor’s in-basket, housing overwhelming numbers of items and folders. As the workload grows, so

does the volume of the in-basket, creating a burden that is difficult to effectively manage throughout the day.

4

How to create better EHR usability to enhance physicians' lives

While physicians recognize the value of the EHR for patient care, they also experience negative associations with patient interactions and work-life integration. But when there is better perceived EHR usability, it is associated with higher levels of positive outcomes and lower levels of negative outcomes.

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